



Self-Directed Attendant Care:

An Overview for Waiver Program Participant



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Background

Beginning more than 30 years ago, many states began experimenting with a new form of home and community-based care for individuals who were directing in-home services.

This alternative form of service delivery empowers directing care to direct their own care with the option of choosing some or all of their own care attendants and essentially serving as the direct employers of their caregivers.

The movement gradually gained in popularity because individuals were ready and willing to take charge of their own care and experienced greater satisfaction with their lives once they had done so.

In other states where the program has already been implemented, the level of satisfaction is reportedly very high.



Self-Directed Attendant Care

Self Directed Attendant Care is available as an option to those served under the Aged & Disabled Medicaid Waiver who qualify for attendant care.

The program allows for the hiring of a friend, neighbor, or formally trained person to serve as personal attendant, or

An individual may choose to advertise, interview and hire the best-qualified applicant

Individuals may choose among the following options:

- choose Self-Directed Attendant Care, solely.
- combine Self-Directed Attendant Care with traditional agency-based services.
- utilize the traditional agency-based services they are familiar with.

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Frequently Used Terms

Fiscal Intermediary: Public Partnerships, LLC (PPL) is the fiscal intermediary. This means that PPL will process payroll and taxes.

Individual or Waiver Program Participant: **If you are the individual on the Medicaid Aged and Disabled Waiver, this is you.** The Individual or waiver program participant is the person who receives attendant care through the Medicaid Aged and Disabled Waiver.

Representative: A voluntary, unpaid person who may be appointed to assist a waiver program participant in performing the responsibilities of the employer when the individual chooses not to do so independently.

Employer, or Employer of Record: This term refers to the person in the household directing the work of the employee. This may be the waiver program participant or a representative.

Employee: The person who provides services to the waiver program participant is the employee or personal attendant.

Role of the Representative

If you choose, you may appoint a Representative to assist in performing the responsibilities of the employer.

The Representative may work with you to:

- Complete paperwork
- Determine a schedule for work and the number of employees needed for that schedule

The Representative may also be involved for support. Or, they may be involved in the beginning to get the bulk of the hiring and training and, then, be available on an as needed basis.

This position can be whatever you need to fulfill your responsibilities as the employer.

This position is voluntary and not a paid position.

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Who can be a Representative?

- Legal guardian of the individual
- Family member, or
- Another person identified by the individual receiving care who must be at least 18 years of age
- Another Case Manager not working with the Consumer

Role of your Case Manager

- **Information brokerage:** Informing, explaining the program and requirements to you
- **Initial Services:** Counseling and assistance with enrollment and working with you to develop and monitor allocation of hours.
- **Continuing services:** Monitoring, evaluating, and assisting you with changes if your plan of care changes.



What are Allowable Activities?

According to the Medicaid Waiver, self-directed attendant care services may include attendant duties, as specified in the plan of care, including the following:

- **Personal Care**

Bathing (tub, shower); partial bath; oral hygiene; hair care; shaving; intact skin care; dressing; clipping hair; application of cosmetics; hand and foot care.

- **Mobility**

Proper body mechanics; transfer between bed and chair; wheelchairs and motor vehicles; ambulation (not including use of assistive devices).

What are Allowable Activities?

(continued..) According to the Medicaid Waiver, self-directed attendant care services may include attendant duties, as specified in the plan of care, including the following:

- **Nutrition**

Feeding including preparation and clean up.

- **Elimination**

Assisting with bedpan, bedside commode, toilet; incontinence or involuntary care; and emptying urine collection and colostomy bags.

What are Allowable Activities?

(continued..) According to the Medicaid Waiver, self-directed attendant care services may include attendant duties, as specified in the plan of care, including the following:

- **Correspondence and Bill Paying**

- **Escorting**

Community activities that are therapeutic in nature or that assist with developing/maintaining natural supports.

Providers who are hired to provide transportation services will be asked to provide a copy of their valid driver's license and proof of insurance.

What are Allowable Activities?

(continued..) According to the Medicaid Waiver, self-directed attendant care services may include attendant duties, as specified in the plan of care, including the following:

- **Safety**

Use of the principles of health and safety in relation to self and client; identify and eliminate safety hazards; and practice health protection cleanliness by appropriate techniques of hand washing.

- **Waste Disposal and Household Tasks**



What Activities are **not** allowed?

- Attendant Care services must follow a written plan of care addressing specific needs determined through your assessment.
- The Medicaid Waiver does not allow for medical procedures.
- Attendant Care services will not be provided to medically unstable individuals as a substitute for care provided by a registered nurse, licensed practical nurse, licensed physician, or other health professional.
- Coverage questions should be referred to the Medicaid Specialist who works with your case manager.



What Activities are **not** allowed?

Services that are exclusively for the benefit of other household members are not allowed. Examples include:

- Running errands for other household members.
- Cooking for other household members.
- Completing laundry for other household members.
- Providing childcare for other household members.

Under the CHOICE program, certain medical procedures could be performed by attendants if a physician authorized them. Under the Medicaid Waiver, there is no provision for this.

What Activities are **not** allowed?

Medical Services are not allowed; examples are in the following list:

- Bearing of full weight of individual during transfer.
- Assistance with ambulation using assistive devices.
- Specialized feedings.
- Other activities which must be performed by a licensed health care professional.
- Total lift transfer of as a quadriplegic.
- Passive range of motion exercises.
- Skin care on broken skin.
- Occupied bed changes.
- Bed baths.



Individual / Employer's Responsibilities

As an employer, you assume certain risks such as bodily injury or property damage.

You should define the duties of your employees so as to minimize this risk.

- Hire someone who is capable of providing the services you need.
 - Can they physically do the job?
 - Are they dependable enough to do the job, etc.
- Move valuables out of the area that your employees will be working.
 - To reduce the risk of theft
 - To reduce the risk of damage to your valuables
- Discuss your enrollment in the program with your insurance agent, to review your coverage

Individual / Employer's Responsibilities

(continued...) As an employer, you or your representative takes on some responsibilities that you must be fully aware of. Employer Responsibilities include:

- Decide whom you want to provide Self-Directed Attendant Care services and inform your case manager.
- Complete the required enrollment packet for the Self-Directed Attendant Care program independently, with the help of another person, or with the help of your case manager. See enrollment packet details on following slides.
- You will be notified by your case manager when it is ok to begin the program. Please do not begin before you hear from your case manager. You will be responsible for paying your employees if you have not been notified to begin the program.

Individual / Employer's Responsibilities

(continued...) As an employer, you or your representative takes on some responsibilities that you must be fully aware of. Employer Responsibilities include:

- Complete online training (alternate formats are available) and review a checklist that verifies your understanding of the program and its requirements.
- Train the caregiver according to your care needs. These must be within the scope of allowable activities. In some cases, you may need to arrange for outside training, but the cost of this is not covered under the A & D Medicaid Waiver.
 - For example, if you would like to have someone take a class on cooking, or first aid, etc.
 - Since no medically skilled work is included in this program, no additional training is provided under this program.

Individual / Employer's Responsibilities

(continued...) As an employer, you or your representative takes on some responsibilities that you must be fully aware of. Employer Responsibilities include:

- Keep and send in timesheets or monitor telephone call-in and call-out times.
- Set-up a back-up plan for care when the attendant is unavailable. (see additional information on Slide entitled "Individual / Employer's Responsibilities: Back Up Plan)



Individual / Employer's Responsibilities

Many tools are provided to you to aid in this process. Worksheets, included in the individual's manual, can be used:

- to create a comprehensive list of the your needs,
- to develop a job description for employees and
- to outline a back up plan for care,
- to guide you through the interviewing and hiring process.



Individual / Employer's Responsibilities

You are responsible for paying for services, if a spend-down is required, until Medicaid services are activated.

Medicaid spend-down requirements have changed. You should discuss this with your case manager if you have had a spend down in the past.

You should already know if you have a spend-down. If you have a spend-down, you will be billed the same way as you have been in the past.

Individual / Employer's Responsibilities

You must have a back up plan the services needed. A back up plan may be designed many different ways, among options are:

- A second attendant, as a back-up plan
 - If paid, these attendants must be enrolled and meet same requirements as regular personal attendants.
 - If informal arrangement and not paid, no enrollment required for these back up attendants.
 - It may be easier to have more than one regular attendants (employees) and ask them to back each other up, rather than having an attendant designated to be for back up purposes only.

Individual / Employer's Responsibilities

(...continued) You must have a back up plan the services they need. A back up plan may be designed many different ways, among options are:

- An Agency-based back-up plan
 - Make arrangements in advance with an agency. If you are still using an agency for other services (such as medical), the agency may be willing to provide back up services.
 - Arranging an agency for back up may be difficult. It is very difficult for them to schedule enough staff to cover their regular schedules. Adding for emergencies outside their normal services is very hard to anticipate.
 - If an agency agrees to be a back up, they are paid at their normal rate. They would be paid under the individual's plan of care, but not within the Self-Directed Attendant Care program.



Individual / Employer's Responsibilities

Please note that hours that are designated for back-up, if any, are not transferable to regular hours for services.

Who is eligible to be a Personal Attendant?

- Must be at least 18 years of age
- Can be a family member (*see next slide)
- Must not have been convicted of a felony
- Must review training materials
- Must be registered with Fiscal Intermediary before providing care and being paid by the Medicaid program
- Must provide copy of driver's license and proof of insurance if providing transportation



Who is **not** eligible to be an Employee / Personal Attendant?

The following individuals are not permitted to be your employees / Personal Attendants:

- Spouses
- Your Parents, if you are a minor child receiving services through this program
- Persons who are legally responsible for you
- Persons who are serving as your Representatives



Can you hire your Power of Attorney?

- Yes and no. This depends on the type of POA.
- Nondurable POAs have rights to conduct only specific transactions (like PPL). Nondurable POAs may be providers.
- Durable POAs enables the Agent to make decisions for you. Durable POAs may NOT be providers.
- Please call us if you have questions concerning your specific case. (866) 264-2296

Employee Compensation

- Units of care are measured in 15 minute increments, similar to current system, following the plan of care/cost comparison budget.
- Employees will be paid at a rate of \$9.80 (effective 10/2006) per hour. Raises will be determined by the State of Indiana.
- Taxes will be withheld from paychecks. Paychecks are issued every two weeks.
- The State of Indiana will cover:
 - ❖ taxes on behalf of the employer, in addition to
 - ❖ unemployment insurance
- Contributions are made to provider's Social Security and Unemployment Compensation accounts.
- There is **no** Worker's Compensation for this program.
- **Service hours will be limited to no more than 40 hours per week per provider for this employer. No overtime will be paid.**

Steps toward Becoming an Employer

It is a courageous thing that you plan to do. You are working hard for your independence.

Please, keep in mind that the majority of the obstacles in front of you and your employee can be traced to

- Respect*
 - Respect your employees and their time*
 - Give clear instructions and do not pile on additional responsibilities unless you are changing their job description.*
 - Hire employees who will respect you and your needs*
- Communication*
 - Begin with open and honest communication*
- Professionalism*
 - Treat this as you would any other employee/employee relationship*



An Inventory of My Needs

This is a great tool for identifying what services you will need.

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Assessing My Lifestyle Worksheet

Food and eating arrangements

What kind of foods do I usually eat?

Likes

Dislikes

If I like different foods than my Self-Directed Attendant Care Caregiver, will I be willing to eat what he/she likes to cook?

Housekeeping

Do I like things very neat or am I not particular? What things can be moved and cleaned, and what things do I want left alone?

Would I like a definite schedule for cleaning and laundry, eg, vacuum on Monday and so forth, or would I prefer to be flexible?

Personal Care

How often do I need to bathe?

How often do I need to shampoo?



Developing the Job Description and Provider Agreement

Why have a Job Description / Personal Attendant Provider Agreement

- To help you identify who is qualified for the job
- To identify what services will be provided
- To start a discussion with your employee and outline the details of the job for everyone



Developing the Job Description and Provider Agreement

Communicating your expectations through a Job Description.

- The employee will have guidelines and know what is expected from the start.
- They know that they (your employees) will be evaluated regularly and given feedback about their performance.
- The job description will be very valuable when evaluating your employee's performance regularly. It creates an outline for you to use while discussing your employee's work.

Developing the Job Description and Provider Agreement

There are many tools provided in your manual. They are designed to help you through the process. Many of these tools are helpful in the hiring process, among those are:

- An inventory of my needs
- Personal Attendant Responsibilities Worksheet
- An overview of competencies
- Developing an advertisement, with samples
- Identifying your preferences
- Sample applications
- Pre-employment checklist
- Employee checklist
- Forms for checking references

Personal Attendant Responsibilities Worksheet

		Needs:	How Often (days a week/ times a day)?	How long does it take?	Preference of time of day (am/pm):	Notes (include preferences and other things):
OTHERS	Writing Letters/Mail	ADL'S	Bathing/Showering			
	Grocery Shopping		Dressing			
	Computer Assistance		Grooming (shaving, hair care, make-up, oral care)			
	Making Bed		Meal Preparation			
	Driving (Van?)		Eating			
	Errands		Bowel Care			
	Laundry/ Ironing		Bladder Care			
	Housekeeping		Turning in Bed			
	AnswerPhone		Transferring			
	Reading		Exercising			
	Others:		Other:			
			TOTAL:			

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Selecting a Personal Attendant

- Checking References is very important to check someone's reliability and honesty. It is highly recommended.
- There is a Reference Form in your manual, along with tips for checking references.
- Using a screening for drugs is not mandatory. If you choose to conduct a drug screening, at you or your employee's expense, you should contact your local health department. There is normally a nominal cost for this service.
- Making the offer to your new employee and complete their enrollment



Staying on Track

- Being assertive in communicating your needs to your employees
- Make employees aware of your emergency information and other important documentation for this program
- General Supervision, including monitoring time-keeping and scheduling
- Review tips for Keeping Your Personal Attendant and How To Be An Effective Employer located in the following slides and in your manual



Communication: Giving Feedback

- Describe the situation as soon as possible after the situation occurs.
- Discuss only one incident at a time.
- Do not bring up things from the past.
Stick to the present.
- Discuss the person's actions, not the person.
- Keep it brief and to the point.



Communication: Giving Feedback

The following 3 slides show different ways to respond to a situation.

The last example is the most effective way to resolve the situation. You **can** effectively have your needs met without creating conflict that would lead to an end to your working relationship with your employees. Let's see how...

Communication:

Passive Response

Situation: You have been working for Joe for several months. You come in at 8:00 p.m. each evening and help him get ready for bed. Tonight he asks you if you could come in at 10:30 p.m. tomorrow evening. You usually plan to be home by 10:30 p.m., as you have to get up early the next morning.

Passive Response: You do not say anything and you come in at 10:30.

Result: You are upset because you know how tired you will be the next day. All the time you are helping Joe, you feel irritated. He asks if there is something wrong and you say, “No”.

Communication: Aggressive Response

Situation: You have been working for Joe for several months. You come in at 8:00 p.m. each evening and help him get ready for bed. Tonight he asks you if you could come in at 10:30 p.m. tomorrow evening. You usually plan to be home by 10:30 p.m., as you have to get up early the next morning.

Aggressive Response: You say to Joe, “Don’t you think that I might be really tired if I come that late?”

Result: Joe gets angry. He says that you are being rude and inconsiderate of his needs. The next time either the private attendant or the employer wants to change the schedule neither of you will want to ask.

Communication:

Assertive Response

Situation: You have been working for Joe for several months. You come in at 8:00 p.m. each evening and help him get ready for bed. Tonight he asks you if you could come in at 10:30 p.m. tomorrow evening. You usually plan to be home by 10:30 p.m., as you have to get up early the next morning.

Best Response, Assertive Response:
Express your genuine concerns.

“Joe, I would really like to help you out but it is difficult for me to stay up that late and then to feel rested the next morning. Is there any other way that we could figure out how to meet your need?”
You have been open and honest as to why this does not work for you, but you have shown him your concern for his needs and your willingness to try to figure out another way of working it out.

Emergency Planning

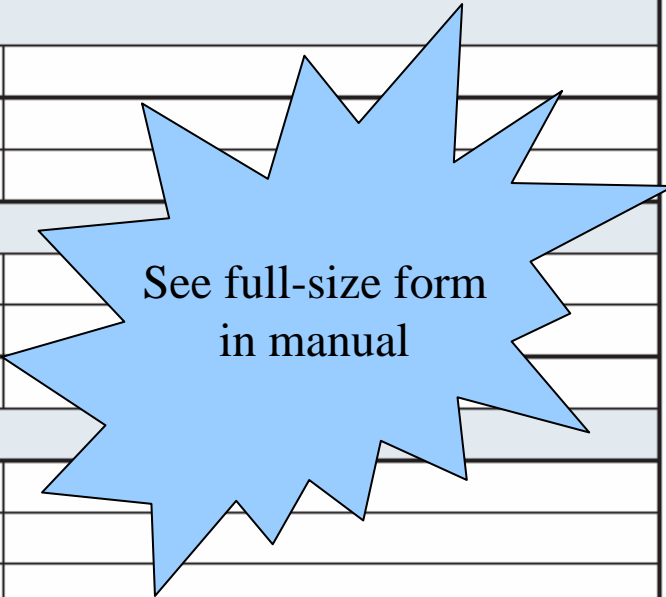
- ☐ Create a multifaceted plan.
 - to cover medical emergencies, hospitalizations, fires, power outages, severe weather, and other natural disasters
- ☐ Make a Personal Contact List for each type of emergency.
- ☐ Make a list of people to contact for each type of emergency.
- ☐ Make a plan on how to contact family and personal attendant.
- ☐ Make a list of medications and/or equipment that you need to take with you if you have to evacuate your home.
- ☐ Organize medical information, emergency contact information, and if applicable, living will information and place it all together in an easy to access location.
- ☐ Store extra food and water in the case of a severe weather emergency or other natural disaster.
- ☐ Include your personal attendant in your emergency planning.
- ☐ Include contact information for your backup provider among your emergency response information.

Emergency Planning

Expect the unexpected....
and be ready for it!

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Emergency Information	
Doctor(s)	
Name	
Address	
Phone	
Insurance(s)	
Company	
Address	
Phone	
Hospital(s)	
Name	
Address	
Phone	
Family Member(s)	
Name	
Address	
Phone	
Friend(s)	
Name	
Address	
Phone	
Medical Information _____ _____ _____ _____ _____ _____	



Emergency Planning

Expect the unexpected....
and be ready for it!

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Emergency Procedures	
Disability Related Emergency:	
Who to Call:	
Phone	
Important Information and Plan	
Back-Up Personal Attendant	
Who to Call:	
Phone	
Important Information and Plan	
Non-Disability Related Emergency:	
Who to Call:	
Phone	
Important Information and Plan	
Severe Weather or Natural Disaster:	
Who to Call:	
Phone	
Important Information and Plan	
Power Outage:	
Who to Call:	
Phone	
Important Information and Plan	
List any Allergies:	
Who to Call:	
Phone	
Important Information and Plan	
Additional Phone Numbers	
Police Department:	
Fire Department	
Poison Control:	
If in Doubt Dial 911	

See full-size form
in manual

Rights and Responsibilities

Employer Rights

- Direct your own personal care.
- Decide who your personal attendant will be and when they will work for you.
- Be treated with dignity and respect, which includes respect of your privacy and confidentiality.
- Replace personal attendants who don't respect your rights.

Personal Attendant Rights

- To be treated with respect
- Be provided with equipment and supplies that are needed to complete assigned duties
- To request time off with adequate notice
- To be paid on time
- To work in a pleasant, safe, non-threatening environment

Responsibilities



Employer

- Being assertive when asking for or turning down help.
- Writing a job description for your personal attendant to sign before starting work.
- Giving praise when it is due.
- Being respectful when talking to your personal attendant.
- Making sure your personal attendant gets paid on time.
- Making emergency information available to your personal attendant.

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Personal Attendant

- Always being on time
- Being honest and open about his/her feelings
- Knowing his or her own skills and limitations and able to discuss them
- Providing reliable, safe, high quality services, as directed
- Making a work schedule with your employer
- Respecting employer and his or her right to privacy and confidentiality
- Notifying employer as soon as possible when he or she knows he or she will be late or unable to work
- Giving at least two weeks notice before making changes or quitting
- Completing job duties as directed

Abuse and Neglect

Abusive behavior is completely unacceptable and is against the law.

- ❑ **Physical abuse** means any action that causes physical pain or injury including but not limited to hitting, pushing, pinching, or kicking.
- ❑ **Sexual abuse** includes but is not limited to rape; any unwanted sexual contact, or sexual harassment.
- ❑ **Emotional and verbal abuse** includes but is not limited to name calling, intimidation, yelling, and swearing.
- ❑ **Neglect** is defined as the lack of attention and due care.
 - Your personal attendant failing to show up for work is neglectful behavior.
 - Failure to provide the appropriate care, water, food or medication is neglectful behavior.

Abuse and Neglect

***Abusive behavior is completely unacceptable
and is against the law.***

Protect yourself at all times. There are many things you can do to help protect yourself:

- ☐ Check the person's references.
- ☐ Let all your personal attendants know that you will not tolerate abuse or neglect and should something occur you would file charges with the proper authorities.
- ☐ Make sure your personal attendant knows you are not isolated; you have a network of support from family and friends.
- ☐ Do not minimize any situation you feel as threatening.
- ☐ Do not think the situation will go away by itself.
- ☐ Tell someone else immediately, if you feel afraid or intimidated by your personal attendant.
- ☐ Have someone with you when you terminate the personal attendant's employment.
- ☐ Contact your case manager to arrange for alternative care.



Individual Receiving Care / Employer Checklist

When you are ready to begin the Self-Directed Attendant Care program, you will be asked to sign the Individual Receiving Care / Employer Checklist.

This form outlines your responsibilities and affirms that you, with your representative (if you have one), are capable of performing these responsibilities

Individual Receiving Care/Employer Training Checklist

As a participant in the Indiana Self-Directed Attendant Care Program, or as a representative of a participant in the Indiana Self-Directed Attendant Care Program, I the undersigned, affirm that I have received training in how to fulfill my role in the program and am presently in good understanding of how the program will work and what my responsibilities will be:

- I, affirm I am capable of performing the duties required of an employer.
- I accept full responsibility for direction of my own personal care and managing the hours that have been approved for my needs in my plan of care.
- My representative or I will hire, train (using the training program provided by this program),

Individual Receiving Care / Employer Checklist

My signature below affirms that I have read and understood these responsibilities and will do my best to discharge them.

Signature
Individual Receiving Care or Representative

Date

Printed Name

(This form to be kept by case manager in individual receiving care's file.)



Quality Assurance

Your case manager will follow up with you, regularly, every 90 days, to ensure that the program is working as planned, or to address any problems that arise.

If a negative report is made, a case manager will file an incident report with the Indiana Family and Social Services Administration (FSSA). An internal committee within FSSA will review quality complaints.

Unresolved, negative quality reports will lead to appropriate action which may include dismissal and removal from the provider registry.

Employees will be notified, in writing, of any complaints and of action to be taken. There is a process in place for appeal.

90-Day Checklist

- Signed by you and your Case Manager
- Reaffirms your eligibility
- Reaffirms your commitment
- Confirms plan is working
- Notes problems that need attention and your plan for resolution

Case Manager 90-Day Checklist

- Consumer or their representative continues to be capable of performing the duties required of an employer.
- The number of hours of care the provider has delivered is in line with the plan of care PA(s) has/have not provide over 40 hours of service in a 1-week period in the plan of care.
- Consumer or representative has submitted timesheets and completed all necessary paperwork as requested by the fiscal intermediary.
- Consumer or representative has hired, trained and is actively supervising the PA.
- Consumer or representative is able to address quality of care and or performance issues with the PA.
- Provider is providing all services appropriately as stated in plan of care and as described in the consumer/provider responsibilities worksheet.
- Consumer has a written back up plan back up provider is still available to provide care.
- Emergency information is up to date and available to the PA.
- There are no issues of abuse, fraud, or neglect.

Signature
Case Manager

Date

As a participant in the Indiana Self-Directed Attendant Care Program, or as a representative of a participant in the Indiana Self-Directed Attendant Care Program, I the undersigned affirm that the care I am receiving is appropriate and I am satisfied with the quality of this care. I am aware of the procedures to report fraud, abuse and how to make changes to the Self-Directed Attendant Care Program. I wish to continue to participate in the Self-Attendant Care Program.

Signature/Self-Directed Care Participant or
Representative

Date

Terminating a Personal Attendant

You should terminate employment immediately if your personal attendant has:

- Stolen something from you
- Been abusive physically or mentally
- Severely violated your agreement
- Broken the law. This should also be reported to the police.

If you have to terminate your personal attendant's employment:

- Keep written records of the event(s) and reasons for termination. This will protect you in case of a later dispute.
- Keep employment records for at least six months.
- Have your keys and any other items that belong to you returned.
- Notify your case manager and the fiscal intermediary immediately.
- Consider changing door locks if there has been bitterness over the termination.



Terminating a Personal Attendant

- Have another person present when terminating a personal attendant, or dismiss over the phone if possible.
- Offer a letter of reference there are parts of the job they have done well.
- Plan in advance. Have back-up worker ready to start in case your personal attendant quits right away.
- Give your personal attendant two weeks notice if it will not put you in a risky or uncomfortable situation.
- Notify the fiscal intermediary upon termination of a personal attendant.



Sticky Situations

Sticky Situations

By planning ahead, you can avoid many sticky situations. The following slides discuss common situations and how to avoid them.



Many of these situations are avoided by:

- communicating effectively with your employees,
- hiring responsible employees,
- respecting one another, and
- treating your working relationship professionally.

Sticky Situations

Tasks not performed properly or completely

It is important that the activities that you need are being done for you. First, because you and your case manager have determined that you need these activities for daily living.

In addition, this is a Medicaid program. If someone is not performing the services that they are hired and paid to do, that could constitute fraud and Medicaid investigate take action if fraud is suspected.

Enforcement could result in losing your eligibility for this and other programs, as well as prosecution of all parties involved.



Sticky Situations

Communication Problems

Begin by communicating effectively. Recognize when there is a problem as soon as possible and address it with your employees.

Talk with your case manager, a representative or someone else to discuss how to handle a situation, and follow our guidelines for giving feedback.

Sometimes it is difficult to think of effective ways to communicate. Take some time, talk it over with someone to practice if you need to.



Sticky Situations



Firing a Personal Attendant

Sometimes things do not work out, for any number of reasons. Ending a work relationship does not have to ruin a relationship with a friend or family member.

Again, communication is the key. Address problems as they arise. Avoid arguments and try to communicate your feelings assertively.

If there has been a change in work performance, and you cannot resolve the issue, you may have to let someone go. Try to find some good that they have done for you and offer a letter of reference.

Be honest and talk about it. Chances are, your employee knows that things are not working out, but they don't want to let you down.



Sticky Situations

Going over budget

As the employer, you are now responsible for staying within your budget each month. You should develop a schedule for your employees that stays within that budget. If an emergency arises during the week, try to compensate for it throughout the rest of the month. For example, if you go over by 2 hours one week, schedule the next 2 weeks with one hour less, if possible.

If you are not able to adjust your schedule, contact your case manager as soon as possible.

If you consistently go over your budgeted units, you may be responsible for the amount that you go over. In addition, you may become ineligible for this program and your case manager may transition you back to more traditional services that you are presently receiving.

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What is a Fiscal Intermediary?

A Fiscal Intermediary processes payroll and completes tax processes on your behalf. The State of Indiana has contracted with Public Partnerships, LLC to perform the role of fiscal intermediary for this program.

Specifically, a Fiscal Intermediary:

- Pays employees/personal attendants on your behalf
- Withholds and deposits taxes, and files tax and labor reports for you
- Provides you, your employees and your case manager with regular reports that show how authorized units have been spent, and the amount of taxes paid
- Responds to your questions and questions from your employees, and your case manager
- Administers the limited criminal history

About Public Partnerships, LLC (PPL)

- Public Partnerships, LLC (PPL) is an affiliated company of Public Consulting Group, Inc. (PCG). PCG is a national consulting firm focused on assisting state and local governments to dramatically improve their financial and operational performance.
- PPL was founded in 1999 to focus exclusively on the financial operations of consumer-directed services.
- PPL contracts in twelve other states to serve as the Fiscal Intermediary for a variety of human services populations, including mental health, developmental disability, adult protective services, child protective services, and foster care arrangements.
- PPL was hired by Indiana FSSA to be the Fiscal Intermediary for the self-directed care program that is part of the Aged & Disabled Medicaid Waiver.

Steps Individuals Take to Become Employers

Ingredients for Success

- Teamwork
- Education
- Communication



Monitor Spending

Submit Time Worked, PPL does Tax Forms (W2, etc.)

Manage Staff

*Obtain Hiring & Supervision Tips
Submit Limited Criminal History &
Employee Tax Forms to PPL*

Recruit Staff

Complete Tax Forms

*Complete Employer Tax Forms & Give PPL
authority to withhold & submit taxes as
your Agent, or "Payroll Department"*

Establish Plan

Identify Services, Employers and Costs

Case Manager Meeting

*Clarify Needs and Goals
Develop Service Plan*

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Managing Payroll Responsibilities

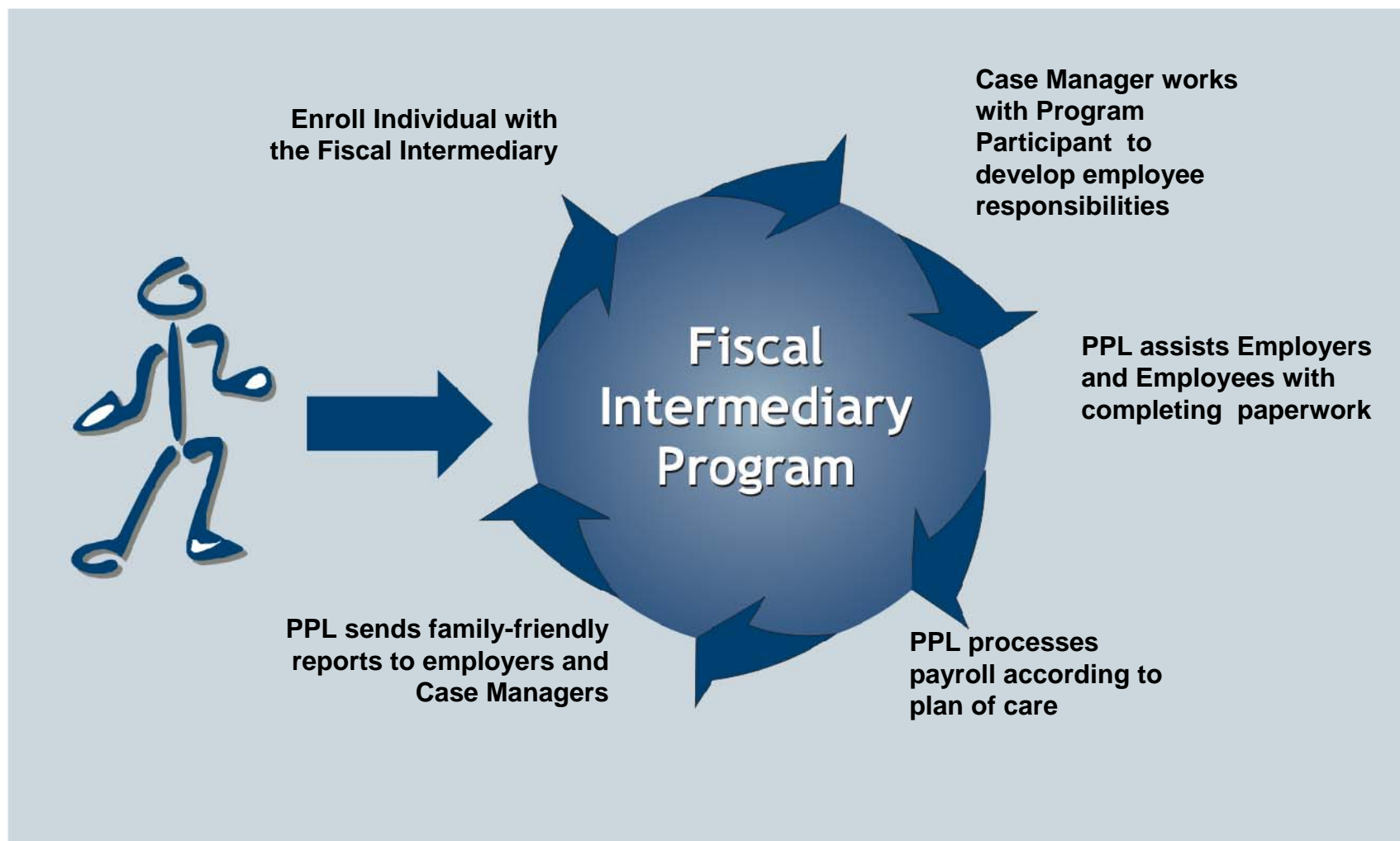
Employer's To Do...

- ☐ Complete initial paperwork
- ☐ Define job and schedule
- ☐ Recruit, interview, train, discharge staff (if necessary)
- ☐ Verify employment eligibility by certifying USCIS Form I-9
- ☐ Sign appropriate tax and employment forms
- ☐ Monitor employee's units of service
- ☐ Review, sign & submit timesheets

Public Partnership's To Do ...

- ☐ Serve as "Payroll Department"
- ☐ Administer limited criminal history
- ☐ Issue paychecks per timesheets
- ☐ Withhold all necessary taxes
- ☐ File monthly, quarterly and annual tax and labor reports
- ☐ Issue annual W-2 wage statements
- ☐ Manage service units
- ☐ Provide individuals, employers and case managers with monthly reports of FI spending on individuals' behalf
- ☐ Respond to all questions

Self-Directed: Person Centered Services





Fiscal Intermediary Benefits

- Your personal income tax is not affected.
- Employees will receive a W-2 statement at the end of each calendar year.
- Contributions are made to provider Social Security and Unemployment Compensation accounts.
- Employees receive bi-weekly paychecks, based on time reported to PPL.

Overview of Employer Forms

- Indiana Form – Individual Receiving Care/Employer Training Worksheet. This requires individuals to agree to their roles and responsibilities. This is the **ONLY** form that case managers must sign.
- Indiana Form BT-1 – Business Tax Application. This state form is used to register individuals as employer and authorizes PPL to perform withholding and other tax preparation/filing functions at the state level.
- Indiana Form POA-1 – Power of Attorney. This state form authorizes PPL to perform withholding and other tax preparation /filing functions on behalf of the individual at the state level.
- Indiana Form 52227 – Power of Attorney. This state form authorizes PPL to file Unemployment Insurance reports on employer's behalf.
- Indiana Form EFT-1 – Electronic Fund Transfer for Authorization Agreement Form.



Overview of Employer Forms

- IRS Form SS-4 – Application for Employer Identification Number. This federal form is used to apply for a new tax identification number as an employer.
- IRS Form 2678 – Employer Appointment of Agent. This federal form authorizes PPL to act on behalf of an individual to perform withholding and other tax preparation/filing functions.
- IRS Form 2848 – Power of Attorney & Declaration of Representative. This federal form authorizes PPL to speak and write to the IRS on the individual's behalf about tax withholding issues only.
- IRS Form 8821 – Tax Information Authorization. This federal form authorizes PPL to speak with the IRS on behalf of the individual about tax withholding issues only.



Overview of Employee Forms

- USCIS Form I-9 – Employment Eligibility Verification. This federal form tells the USCIS that the employee is eligible for employment in the United States.
- IRS W-4 Form - Employee's Withholding Allowance Certificate. This federal form tells the IRS about the withholding allowances for which the employee is eligible.
- Form WH-4 - Employee's Withholding Exemption and County Status Certificate. This form tells the State about the withholding allowances for which the employee is eligible.



Overview of Employee Forms

- Employment Terms and Conditions – This form serves as a contract between employers and employees.
- Employee Data Form – This form collects basic demographic data about employees.
- Employee Training Checklist – This form is documentation of employee understanding of self-directed care.
- Federal Tax Exemption Information Form – This form is to be completed by family members serving as employee for the purpose of identifying special tax circumstances.

Timekeeping

There are two methods for submitting time worked:

- **Telephonic timesheet (preferred method)**
- Physical timesheet (back-up method)
- The telephonic timesheet is done over the phone.
 - 1) The employee calls a toll-free phone number upon arrival.
 - 2) The employee enters the individual's Medicaid ID# and their Employee ID# in order to "clock in".
 - 3) After services have been performed, the employee calls the same toll-free number to "clock out".
 - 4) The employee will enter a service code and activity codes for the services performed.
- Service hours will be limited to no more than 40 hours per week per provider for each individual enrolled.
No overtime will be paid.

Timekeeping

There are two methods for submitting time worked:

- Telephonic timesheet (preferred method)
- **Physical timesheet (back-up method)**
 - The physical timesheet is completed every two weeks and signed by both the Employer and Employee.
The timesheet can either be:
 - ❖ faxed using a toll-free fax number, or
 - ❖ mailed to PPL
 - Service hours will be limited to no more than 40 hours per week per provider for each individual enrolled.
No overtime will be paid.

Timekeeping

Here is an example of a correctly completed time sheet.

PUBLIC PARTNERSHIPS, LLC EMPLOYEE TIMESHEET (Fiscal Intermediary for IN FSSA's Self-Directed Attendant Care Program)

Employer's Name: Frances Fake (3 1 7) 5 5 5 - 1 2 3 4 Employer's ID: 9 8 7 6 5 4 3 2 1 0

Employee's Name: Jane Doe (3 1 7) 5 5 5 - 5 5 5 5 Employee's ID: 5 5 6 6 7 7

FAX: PPL @ 866-874-0478 MAIL: PUBLIC PARTNERSHIPS 6 Admirals Way Chelsea, MA 02150

Week 1 Begin: Monday (mm/dd/yyyy) 0 1 / 0 1 / 2 0 0 6

	Time IN	AM/PM	Time OUT	AM/PM	Total Hours
Mon	1 0	0 0	0 3	1 5	0 5
Tue	1 1	0 0	0 4	3 0	0 5
Wed					
Thu	1 0	0 0	1 1	5 9	0 1
Fri	1 2	0 0	0 2	0 0	0 2
Sat	0 9	0 0	1 0	3 0	0 1
Sun	0 1	3 0	0 2	3 0	0 1

Week 2 End: Sunday (mm/dd/yyyy) 0 1 / 1 4 / 2 0 0 6

	Time IN	AM/PM	Time OUT	AM/PM	Total Hours
Mon	0 9	0 0	1 0	3 0	0 1
Tue	0 1	3 0	0 2	3 0	0 1
Wed					
Thu					
Fri					
Sat					
Sun					

By signing below, I certify that I have provided the services to the employer during the times described on this timesheet.
Date (mm/dd/yyyy): 0 1 / 1 4 / 2 0 0 6 Employee Signature: Jane Doe

I certify that the employer has received hours of service as reported above.
Date (mm/dd/yyyy): 0 1 / 1 4 / 2 0 0 6 Employer Signature: Frances Fake

USE BLACK INK, PRINT ONE CHARACTER PER BOX, FILL CIRCLES COMPLETELY, DO NOT TOUCH THE LINES !!!

Timekeeping: Activity Codes

Service and Activity Codes are entered as you are logging (clocking) out. These codes refer to the services that you provided. The following is a list of some Service and Activity Codes:

Service Codes

01 Personal Care



Activity Codes

11 Bathing

12 Grooming

13 Hair Care

14 Walking

15 Meal Preparation

16 Housekeeping

17 Laundry

18 Errands

19 Other Tasks



Timekeeping

Additional information concerning the process of timekeeping can be found:

- by reviewing the online training for the [Fiscal Intermediary Services](#)
- Or, by referring to the employee manual: [A Guide for the Individual Providing Care](#)




Overview of Reporting

- ***Family Reports:*** Detailed monthly reports for each service includes amount of funds spent and remaining funds
- ***Case Manager Reports:*** Detailed monthly reports allow monitoring and managing resources across individuals
- ***Funder Reports:*** Detailed monthly reports include year-to-date spending and services
- ***Customized Reports:*** Generated as needed

Family Friendly Report

- Designed for a family audience
- Summarizes account spending activity to date
- Reflects budget variances
- Easy to read and understand
- Mailed directly to case managers and families on a monthly basis
- Can be produced in multiple languages

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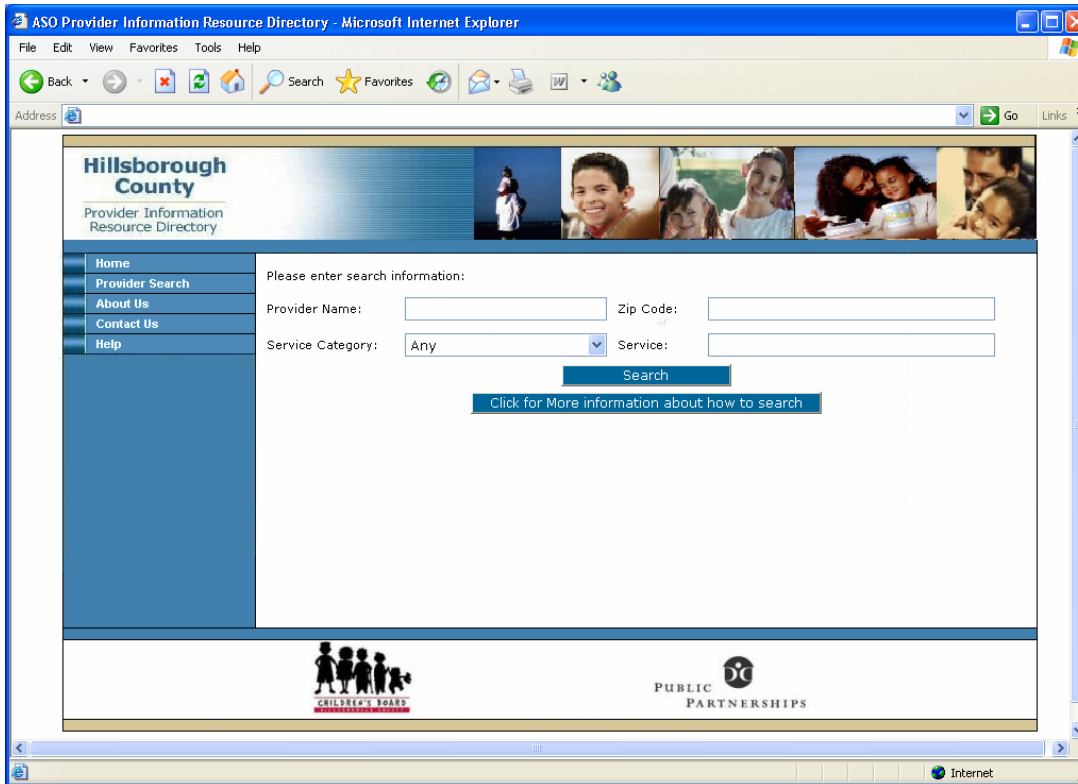
 PUBLIC PARTNERSHIPS	PUBLIC PARTNERSHIPS, LLC 148 State Street, 10th Floor Boston, MA 02109 (617) 426 2026																			
YEAR TO DATE SPENDING SUMMARY REPORT																				
Account Information																				
Participant, Jim	ISNB#: 1234-FF-1																			
Address	Case Manager: Jane Smith																			
City, State Zip	Report Print Date: 4/30/2001																			
	Fiscal Year-Period: 2001-10																			
How to Read this Report																				
Read the chart below to see how much money you have spent for each item compared to how you budgeted. Check the "remaining balance" column to see if you still have funds available for each item. If there are no "()" around the amount, that means you still have funds available to you for that service item. But, if there are "()" around the "Remaining Balance" amount, that means you have exceeded the dollars budgeted to you for that service item. A zero indicates that you have no funds budgeted for that item, but you may have submitted invoices for payment. Additional pages may follow this summary that include detailed payment information.																				
How Much of My Budget Have I Spent Through April 30, 2001																				
<table><thead><tr><th>Service Description</th><th>Funds Budgeted</th><th>Funds Spent YTD</th><th>Balance</th><th>% of Funds</th></tr></thead><tbody><tr><td>Personal Attendant Services</td><td>3,392.72</td><td>1,174.80</td><td>2,217.92</td><td>65%</td></tr><tr><td colspan="5">GRAND TOTALS</td></tr></tbody></table>	Service Description	Funds Budgeted	Funds Spent YTD	Balance	% of Funds	Personal Attendant Services	3,392.72	1,174.80	2,217.92	65%	GRAND TOTALS					<table><tbody><tr><td>3,392.72</td><td>1,174.80</td><td>2,217.92</td><td>65%</td></tr></tbody></table>	3,392.72	1,174.80	2,217.92	65%
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Network Development

- Network is infinite!
- Individuals select providers based on their plan of care.
- Employees may be traditional or non-traditional.
- Potential for family members to become employers.

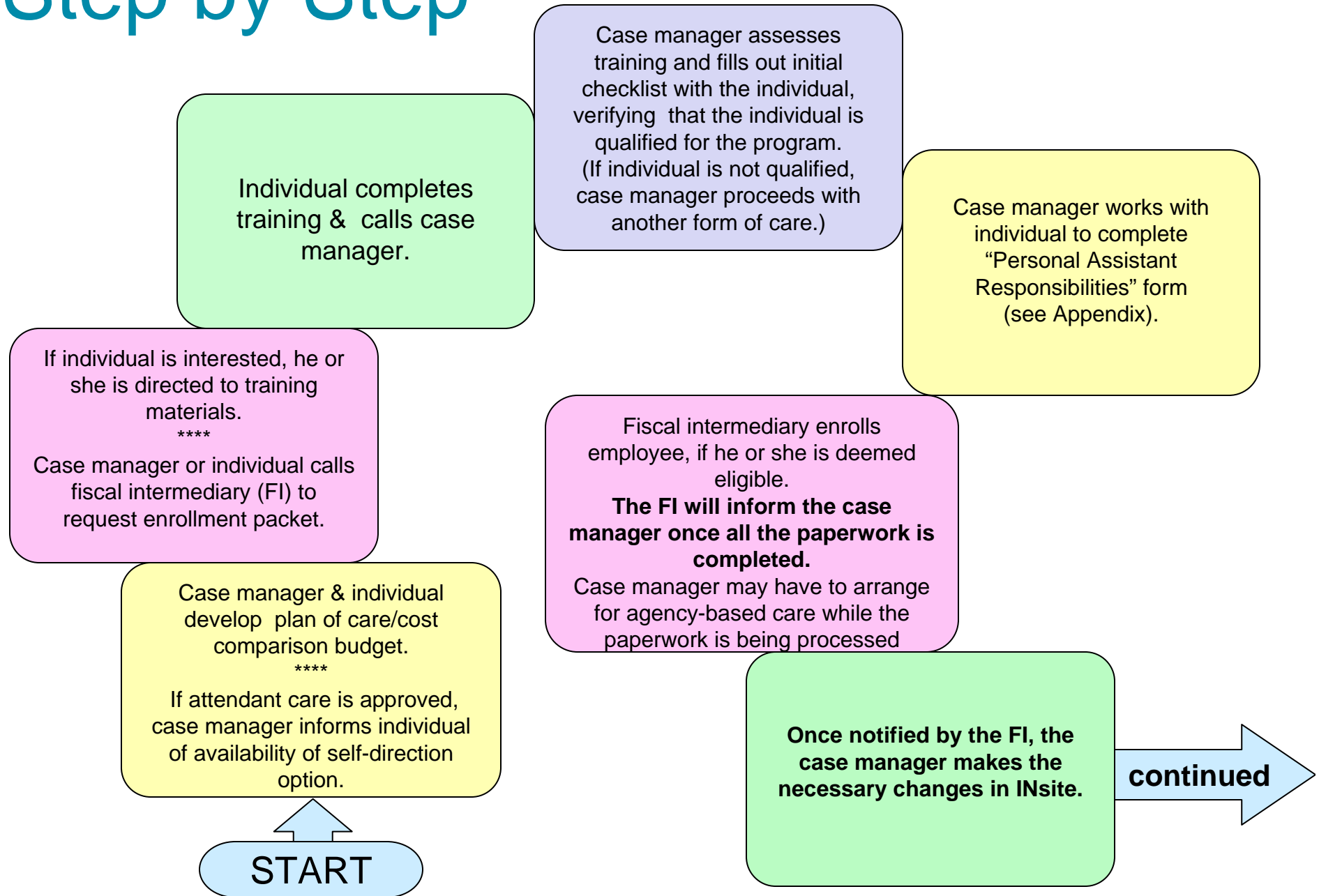
Website & Provider Registry



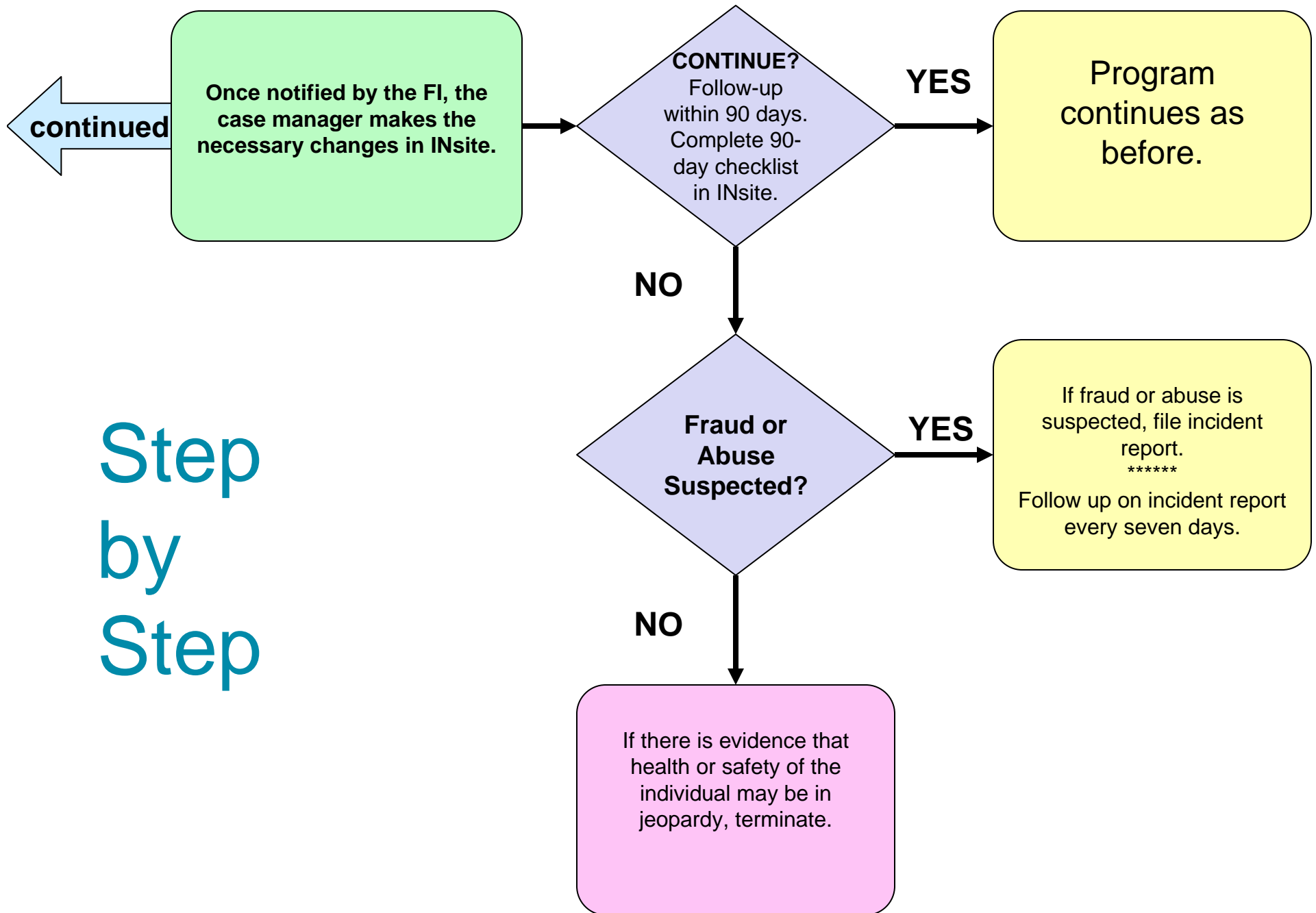
www.publicpartnerships.com

- Contains forms and training materials
- Allows individuals and case managers access to provider database
- Includes services, credentials, hours, location, and contact information for providers who choose to be listed

Step by Step



Step by Step



Where To Go For Help / Customer Service Hotline

General Customer Svc	Public Partnerships (866) 264-2296
Fraud	Attorney General (800) 382-1039 Medicaid Fraud (317) 232-1217 (800) 457-4515
Abuse & Neglect	Adult Protective Services (800) 992-6978

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Next Steps



- Request enrollment packet
- Discuss this option with your case manager
- Fill out enrollment forms
- Review the Fiscal Intermediary presentation
- Hire your choice of Personal Attendant(s)
- Take charge of your life once again!

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